



**STATE OF CONNECTICUT**  
**DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES**  
*A Healthcare Service Agency*

Dannel P. Malloy  
Governor

Patricia A. Rehmer, MSN  
Commissioner

**Testimony of Patricia A. Rehmer, MSN, Commissioner**  
**Department of Mental Health & Addiction Services**  
**Before the Appropriations Committee**  
**February 22, 2012**

Good morning, Senator Harp, Representative Walker and distinguished members of the Appropriations Committee. I am Patricia A. Rehmer, Commissioner of the Department of Mental Health and Addiction Services. DMHAS, as a health care service agency, focuses on helping more than 110,000 adults annually over age 18 - from communities throughout all of Connecticut - to recover and sustain their health in response to a psychiatric disability and/or substance use disorder. The DMHAS system of care is a public/private partnership. It includes DMHAS' operated services - one (1) hospital and six (6) local mental health centers - and contracted partnerships with the state's general hospitals and over 165 private non-profit, community-based agencies statewide.

I am pleased to be here to discuss the Governor's proposed mid-term budget recommendations for FY 2013. As Connecticut continues to deal with its budgetary challenges, the Department remains committed to its core mission of promoting wellness, preventing illness, and developing a recovery-oriented system of care for people with serious psychiatric and substance use conditions. This budget will preserve our core safety net function and allows us to effectively respond to our mission and to meet the goals as stated above. Its focus on funding for community services rather than expensive inpatient beds will continue to move our system forward. The DMHAS proposed budget changes presented to you by the Governor is one that not only protects core services that are in place, but also adds new funding that is critical to the system as we continue to advance recovery-oriented services.

The Governor's recommended budget for DMHAS includes funding for increased caseload and utilization growth in important DMHAS programs. These include: 1) the Hospital Discharge Fund and 2) the Acquired Brain Injury Program. The Governor also continues his and your commitment to the funding of our Young Adult Services Program, and our Home and Community Based Waiver programs. All of these significant commitment of dollars continue to move persons with psychiatric disabilities into less expensive and more recovery focused levels of care.

Let me take a moment to describe some of the recommended changes in the Governor's mid term budget adjustments:

- The recommended budget increases the Hospital Discharge fund by 1.5 million dollars. These funds will support individuals that are in very expensive inpatient beds at Connecticut Valley Hospital and transition them into community placements. These dollars will go a long way toward promoting recovery and giving these individuals an opportunity to live productive lives. It will also send a clear and consistent message to the Department of Justice who has been monitoring the

patient flow at CVH that we are keeping up our commitment to moving these individuals into the least restrictive environment.

- Funding in the biennial budget included funding for 9 additional community placements for individuals with traumatic or acquired brain injury TBI/ABI in the amount of \$1.1 million in FY 2012 and \$1.5 million in FY 2013. The mid-term budget increases that funding by another \$1.5 million for 6 additional placements. This additional funding will provide community options for those individuals with TBI/ABI who are in DMHAS' inpatient settings – but who no longer need a hospital level of care.
- New funding of \$800,000 is recommended to support our private not for profit providers of group home services.
- New funding of \$300,000 is recommended for Nursing Home Services for high need individuals. This funding has been targeted for individuals needing nursing home care who are transitioning from a correctional facility, have criminal justice involvement and have been difficult to place. This funding represents partial funding to support development of a nursing home to serve this population. This would enable the state to receive additional matching federal funds and reduce state spending for these inpatient state funded beds.
- Funding of \$293,461 is recommended in FY 2013 to support the funding of the Military Support Program. This program was established by the General Assembly through one-time funds from the sale of Fairfield Hospital which have been expensed. Since 2007, the MSP program has provided outpatient counseling, outreach, case management, referral and advocacy, and transportation services to reserve component service members and their families.

In addition to the above recommendations proposed in the budget for DMHAS, there are several proposed service reconfigurations. The Governor's budget proposes to consolidate the Psychiatric Security Review Board with the Department of Mental Health, maintaining the Boards independent decision making while achieving administrative efficiencies, reallocates \$300,000 funding for the Mental Health Alternative to Incarceration from DOC to DMHAS, reallocates service funds of \$882,000 for institutional student aid funding from SDE, and reallocates housing support service funds of \$1.2 million from DSS. The budget also includes savings of \$100,000 by reducing funding for Legal Services to FY 2011 levels and saving of \$5.6 million to the Medicaid for Low-Income Adults (LIA) program under a waiver which would establish an asset limit of \$25,000 and include family income when determining LIA eligibility for individuals who are under age 26 and either living with a parent or claimed as a dependent for tax purposes.

Other reductions and efficiencies to the DMHAS budget include savings estimated at approximately \$2.9 million as a result of the decreased need for uncompensated care grants for hospitals and federally qualified health centers (FQHCs), as the result of significantly increased LIA reimbursements for these providers. Additionally, the DMHAS personal services account has been reduced by \$2.3 million as a result of targeted new hires that will achieve overtime savings in fiscal year 2013.

I am happy to report that the Governor's budget does propose funding of 1 percent beginning January 1<sup>st</sup> 2013 to the grants accounts that support our private, not for profit providers.

Thank you again for the opportunity to address the Committee today. I believe that the budget before you will help address many of the needs of those we serve. We will be happy to take any questions you may have at this time.